Appendix VIII Test 7

Working Hard Inc

Schedules to be tested within Form 20C: Schedule A Schedule D-1 Other Information

Required Attachments: AL8453C.PDF Federal1120.PDF Federal7004.PDF

20C

Alabama Department of Revenue Corporation Income Tax Return

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SY \square	LU	UU

	F	or the year	ar January 1	– December 31,	2005, or other ta	ax year begi	_{nning} January	1	, 200	5, ending Dece	mber 3	1	, _2(005	
	- Che	ack	FEDERAL BU	SINESS CODE NUMB	BER		FEDERAL EMPL		TIFICATION I	NUMBER		Filin	g Stat	us: (see instructions)	
-	applica		NAME				11-00	<u> </u>					1. Corp	poration operating only i	n
	box	:	ADDRESS	RKING HA	ARD INC									oama.	
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	2			,		*							2	0,070,000	
	3												3	37,905,537	
	4			•		,	nes 1, 2 and 3)						4	29,832,534	
	5			•		•	lule C, line 2, col. E						5		
	6	Apportion	onable inco	me (add lines	4 and 5)			· 				.▶	6	29,832,534	
	7)						7		528 %
	8												8	15,752	
_	9						C, line 2, col. F) .						9	45.750	
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ORDER HERE	13 14			•	,							F	14	15752.	
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	10				r Schedule D-2	P. line 4)		▶	15a	1,	024				
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g									16a	29,	179				
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동		Paid	,			FE			404			_		FEDERAL RETURN IS	8
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	Plea	ise		✓ I authorize Under penalties	a representative s of perjury. I de	of the Depared	artment of Revenue t have examined this i	o discuss eturn and	my return accompa	and attachments Inving schedules a	with my pre nd stateme	parer. ents. an	d to the	best of my knowledge and	l belief
	Sigr			they are true, co	orrect, and compl	ete. Declara	ation of preparer (oth	er than ta	xpayer) is	based on all infor	nation of w	hich pre	eparer l	nas any knowledge.	
	Here			Donald '	Williams	on		TRI	EASUF	RER		09/14	4/2006	(280) 205-5	524
				Signature				Title					Date	Daytime Telephone I	
	Paid	1		Preparer's	homas	Sm	ith			Date	Check if			Preparer's Social Security	
		parer's					I CI I			09/14/2006	self-employ		\perp	314 96 58	48
		Only		Firm's name (or yo if self-employed)	017(1		IN OTREET	A B 13 (T	0\4#:-	Tel. No. (280	212-6	000	_	. ▶ 43-6955656	
		•		and address	137 W	∟SIM/	AIN STREET,	ANYT	NVVU	NC			ZIP Co	ode ► 28041	

ALABAMA 20C – 2005 PAGE 2

Schedule A

Reconciliation Adjustments of Federal Taxable Income to Alabama Taxable Income

§40-18-33, Code of Alabama 1975, defines Alabama Taxable Income as federal taxable income without the benefit of the federal net operating loss plus specific additions and less specific deductions. The specific additions and deductions are reflected in the lines provided below. Other reconciliation items include transition adjustments to prevent duplicate deduction or duplicate taxation of items previously deducted or reported on Alabama income tax returns.

		·					
ΑC	DITIONS						
1					1	166,461	
2	•			s (everywhere)	2		
3	-	n which the taxpayer owns less than	•				
					3	15,396,347	
4		tion control items previously deducte	•				
					4		
5					5	22,342,729	
6		intangible expenses or costs. From S). 1			
	Total Payments 6a	minus Exempt Amo	ount 6b	equals	6c		
7					7		
8					8		
9		rough 8)		<u>\</u>	9	37,905,537	
DE	DUCTIONS					1	
10				ırn)	10		
11					11		
12		ligations of Alabama or its subdivision					
		e instructions)			12		
13		oligations issued prior to 12/31/1994					
					13		
14				41-10-44.8(d)	14		
15				it	15		
16				of stock (see instructions)	16		
17		20% stock ownership (including that					
			_	om domestic corporations	17		
18		-		ons)	18		
19		nder lease agreements entered into		-			
					19		
20	Amount of the oil/gas depletion	on allowance provided by §40-18-16	that exceeds the federal allow	ance (see instructions)	20		
21					21		
22					22		
23					23		
24					24		
25		DJUSTMENTS (subtract line 24 fror				07.005.507	
	Enter here and on line 3, page	e 1 (enclose a negative amount in p	arentheses)	>	25	37,905,537	
	Schedule B	Alabama Net Operating Los	s Carryforward Calcula	tion (§40-18-35.1, Code of A	<i>Alabar</i>	na 1975)	
	Column 1	Column 2	Column 3	Column 4		Column 5	
	Year of loss	Amount of Alabama net operating loss	Amount used in years prior to this year	Amount used this year		Remaining unused net operating loss	
		l l l l l l l l l l l l l l l l l l l	p ,	,			
					\neg		
Ala	abama net operating loss (en	ter here and on line 13, page 1).					

ALABAMA 20C – 2005 PAGE 3

Schedule C Allocation of Nonbusiness Income, Loss, and Expense – Use only if you checked Filing Status 2, page 1

Identify by account name and amount, all items of nonbusiness income, loss and expense removed from apportionable income and those items which are directly allocable to Alabama. Adjustment(s) must also be made for any proration of expenses under Alabama Income Tax Rule 810-27-1-4-.01, which states, "Any allowable deduction that is applicable to both business and nonbusiness income of the taxpayer shall be prorated to each class of income in determining income subject to tax as provided..." (See instructions)

	ALLOCABLE GROS	SS INCOME / LOSS	RELATED	EXPENSE	NET OF RELA	TED EXPENSE
DIRECTLY ALLOCABLE ITEMS OF NONBUSINESS INCOME OR LOSS	Column A Everywhere	Column B Alabama	Column C Everywhere	Column D Alabama	Column E Everywhere	Column F Alabama
1a						
b						
С						
d						
е						
2 NET NONBUSINESS INCOME / LOSS Enter Column E total ((income)/loss) on		r Column F total (incor	me/(loss)) on line 9 of p	oage 1	Column E	Column F
Sahadula D.1 Apportion	nmont Factor /	lea anly if you at	ookod Eilina Sta	tuc 2 nago 1		

Apportionment Factor – Use only if you checked Filing Status 2, page 1 TANGIBLE PROPERTY AT COST FOR ALABAMA **EVERYWHERE BEGINNING OF YEAR** PRODUCTION OF BUSINESS INCOME **BEGINNING OF YEAR END OF YEAR END OF YEAR** Inventories Land Furniture and fixtures Machinery and equipment 7.669 7.049 35,185,666 50,748,679 Buildings and leasehold improvements IDB/IRB property (at cost) Government property (at FMV) 8 9 Less Construction in progress (if included) 35,185,666 7,669 10 Totals 7.049 50,748,679 11 Average owned property (BOY + EOY ÷ 2) 7,359 42,967,173.00 12,757,259 x8 Annual rental expense x8 =102,058,072 7.359 13 13b 145.025.245 0.0050 % Alabama property factor — 13a ÷ 13b = line 14 14 **EVERYWHERE** ALABAMA SALARIES, WAGES, COMMISSIONS AND OTHER COMPENSATION 15a 15b 15c RELATED TO THE PRODUCTION OF BUSINESS INCOME Alabama payroll factor — 15a ÷ 15b = 15c 180,305 174,464,026 0.0010 % SALES ALABAMA **EVERYWHERE** 16 Destination sales (see instructions)..... 17 Origin sales (see instructions)..... 19 Dividends. 20 Interest 21 Rents. 22 Royalties Gross proceeds from capital and ordinary gains 23 Other STATEMENT 1 249,519 24 (Federal 1120, line 3 498,025,132

	Schedule D-2	Percentage of Sales - Use only if you checked Filing Status 3, p	age 1 – See instructio	ns
DO	NOT USE THIS SCHEDU	JLE IF ALABAMA SALES EXCEED \$100,000.	ALABAMA	EVERYWHERE
1	Destination Sales			
2	Origin Sales			
3	Total gross receipts from	n sales		
4	Tax due (multiply line 3,	Alabama by .0025) (enter here and on page 1, line 15a)		

Sum of lines 14, 15c, and 25c ÷ 3 = ALABAMA APPORTIONMENT FACTOR (Enter here and on line 7, page 1)

25a

249.519

Alabama sales factor — 25a ÷ 25b = line 25c

25

498,025,132

25c ▶

0.0501%

0.0528 %

ALABAMA 20C - 2005 PAGE 4 Federal Income Tax (FIT) Deduction/(Refund) Schedule E (a) If this corporation is an accrual-basis taxpayer and files a separate consolidated federal return, indicate the number of the election made under IRC §1552. \square 1552(a)(1) \square 1552(a)(2) \square 1552(a)(3) (nonconsolidated) federal income tax return with the IRS, enter on line 1 below the amount of federal income tax liability shown on Form 1120. ✓ No Election Made ☐ Other Attach a copy of the common parent corporation's current 1552 election letter. Cash-basis taxpayers filing separate (nonconsolidated) federal returns should enter on line 1 below the amount of federal income tax actually Enter on line 1 the amount of the consolidated tax liability allocated to this corporation paid during the year. under the method indicated above. Ignore any supplemental elections under IRC (b) If this corporation is a member of an affiliated group which files a §1502. Attach a schedule of your computations. Federal income tax deduction to be apportioned..... 12,108 4 Federal income tax apportionment factor (line 2 divided by line 3)..... 0.0528 % 5 Federal income tax deduction apportioned to Alabama (multiply line 1 by line 4)..... 6 Refund of federal income tax deducted in prior year(s) (see instructions)..... 7 NET FEDERAL INCOME TAX DEDUCTION / (REFUND) (subtract line 6 from line 5). Enter here and on line 11, page 1 ▶ 7 Schedule F Credits/Exemptions Caution – See Instructions Alabama Enterprise Zone Credit/Exemptions 1 2 Employer Education Credit..... 2 Income Tax Credit 3 Tax Increment Fund Payment Credit Coal Tax Credit..... 5 Capital Tax Credit (Project Number(s) 7 TOTAL (add lines 1 through 6). Enter here and on line 16f, page 1. Schedule G Consolidated Filing Fee Other Information 1. Briefly describe your Alabama operations. COMPUTER SOFTWARE Complete this schedule if the corporation has elected to file a consolidated return for Alabama. The election is made by filing Form 20C-CRE on or before the due date of the return, including extensions, for the first taxable year for which the 2. List locations of property within Alabama (cities and counties). BIRMINGHAM election is made. For tax periods beginning after December 31, 1998, an Alabama affiliated group 3. List other states in which corporation operates, if applicable. NC may elect to file an Alabama consolidated return. Refer to §40-18-39(c)(1), Code of Alabama 1975. (See instructions.) **Total Assets of** 4. Indicate your tax accounting method: **Affiliated Group Annual Fee** \$0 to \$2,500,000 \$5.000 ✓ Accrual ☐ Cash ☐ Other 5. If this corporation is a member of an affiliated group which files a consolidated \$2.500.001 to \$5.000.000 \$10.000 federal return, the following information **must be provided:** \$5,000,001 to \$7,500,000 \$15,000 (a) Copy of Federal Form 851, Affiliations Schedule. Identify by asterisk \$7,500,001 to \$10,000,000 \$20,000 or underline the names of those corporations subject to tax in Alabama. \$10,000,001 and over \$25,000 (b) Copy of the spreadsheet of the income statements for EVERY corpo-**Consolidated Filing Fee.** (Enter here and on Line 15b, page 1) ration in the consolidated group. (Note: Total assets are those assets indicated on page one of the Federal Form (c) Copy of consolidated Federal Form 1120, pages 1-4, as filed with the 1120.) 6. Enter this corporation's federal net income (see instructions for page 1, line 1) If income from a taxpayer was reported on this return and an Alabama business for the last three (3) years, as last determined (e.g.: per amended federal privilege tax return was filed for the taxpayer under a FEIN different from the one return or IRS audit). listed on this return, please enter the name and FEIN reported on the Alabama 2004 10,797,706 2003 65,421,456 2002 23,958,292 business privilege tax return for each such taxpayer (attach listings as needed): 7. Are you currently being audited by the IRS?
Yes
No Name FFIN 8. Location of the corporate records: Street address: 37 ANY STREET City:ANYTOWN State:NC ZIP:28041 8. Person to contact for information concerning this return: Mail to: Alabama Department of Revenue Name: THOMAS G. SMITH Individual and Corporate Tax Division Telephone: (280) 212-6000 Corporate Tax Section

PO Box 327430

Montgomery, AL 36132-7430

Page 88 of 150

AL8453-C

ALABAMA DEPARTMENT OF REVENUE

2005

INDIVIDUAL & CORPORATE TAX DIVISION

Corporate Income Tax Declaration for Electronic Filing

To be filed electronically with the corporation's tax return. Do not send paper copies.

For calendar year 2005, or tax year beginning, 2005, ending		12/31	, 2005
NAME OF CORPORATION WORKING HARD INC		The same and the same of the s	P IDENTIFICATION NUMBER 0000007
ADDRESS OF CORPORATION 37 ANY STREET		TELEPHONE NUMBE	R
ANYTOWN,NC 28041-0280		(280	205-5524
PART I Tax Return Information (Whole Dollars Only)			
1 Alabama taxable income (Form 20C, line 14)	1	15,752	
2 Total tax liability (Form 20C, line 15c)		1,024	
3 Total payments and credits (Form 20C, line 16h)	3	29,179	
4 Refund (negative number reported on Form 20C, line 18)		0	
5 Amount you owe (positive number reported on Form 20C, line 18)		237	
6 Amount of payment remitted electronically	-	237	
PART II Declaration of Officer (Sign only after Part I is completed.)			
✓ I authorize a representative of the Department of Revenue to discuss my return and attachments with my page 500 Sign Here	► TRE		
Signature of Officer Date T	tie		
PART III Declaration of Electronic Return Originator (ERO) and Paid Preparer (See In	structions)	
I declare that I have reviewed the above corporation's return and that the entries on Form AL8453-C a edge. If I am only a collector, I am not responsible for reviewing the return and only declare that this fo corporate officer will have signed this form before I submit the return. I will give the officer a copy of all for Department of Revenue, and have followed all other requirements in Pub. 3112, IRS e-file Application File Information for Authorized IRS e-file Providers of Forms 1120/1120S and Pub. AL4164 Softwa Schemas for Alabama Corporate Income Tax Returns. If I am also the Pald Preparer, under penalties of corporation's return and accompanying schedules and statements, and to the best of my knowledge an Paid Preparer declaration is based on all information of which I have any knowledge.	m accu orms and and Par re Deve perjury i belief,	rately reflects the d information to b ticipation, and Po- elopers and Trans I declare that I ha they are true, con	data on the return. The e filed with the Alabama b. 4163, Modernized e smitters Guidelines and ave examined the above
ERO's ERO's paid preparer		eck if f-employed	314965848
Only if self-emoloyed) CPA FIRM		EIN	436955656
address and ZIP code 137 WEST MAIN STREET, ANYTOWN, NC 28041		Phone No. (2	280) 212-6000
Under penalties of perjury, I declare that I have examined this return and accompanying schedules a and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is bas knowledge.		Il information of	which preparer has any
Preparer's Signature Shomas Onoth Date 9/14/2006		eck if if-employed	Preparer's SSN or PTIN 314-96-5848
Line Only If self-amplesed Vous		EIN	436955656
address and ZIP code 137 WEST MAIN STREET, ANYTOWN, NC 28041		Phone No. (2	280) 212-6000

Federal 1120. pdf

	4	11	20	U.S.	Corporation	Income T	ax Ret	urn			OMB No. 1545	-0123
For		t of the	Treasury For calc		r tax year beginning				, 2	20	200	5
Inter	nal Re	venue \$	Service			te instructions.						<u> </u>
	Checl Conso		return Use IRS	Name							identification nu	ımber
(attach	Form	851) . Lahel		ARD INCORPORAT					1 000		
		iai noic Sch.	ding co. Otherwise	e,	and room or suite no. If a	P.O. box, see ins	tructions.			ate incor		
		al servi structio	ce corp.	37 ANY STRE	te, and ZIP code					5/1984	s (see instructions)	
4	Schedu	ule M-3	required		NC 28041-0280				\$	iai asseis	583895287	I
		Sch. M		(2) Final return	(3) Name change	(4) Addre	ess change		Φ		363693267	
				498025132	1			1 1	D. I. N.	1c	498025132	
			ross receipts or sales	•	b Less returns and				Bal ►	2	421489499	-
	2									3	76535633	
	3		•							4	15396347	
Ф	5									5	466580	
Income	6									6	316065	
<u>u</u>	7									7		
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	10				schedule)					10	318156	
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·s	12				ine 4)					12		
deductions.)	13	S	alaries and wages (le	ess employment c	redits)					13		
quet	14	R	epairs and maintena	nce						14	961544	
	15	В	ad debts							15		
o	16	R	ents							16	12757258	
ons	17	Ta	axes and licenses .							17	968671	<u> </u>
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<u>=</u>	19				s for 10% limitation).					19		-
ons (See instructions for limitations	20							9029904		000	9029904	
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cţi	27		,	,					•	27	85178831	
Deducti	28				s deduction and specia			7 from line	11	28	7323344	
Ω	29				(see instructions)		29a					
			b Special ded	ductions (Schedul	e C, line 20)		29b 1	5396347		29c	15396347	
	30	T	axable income. Sub	tract line 29c from	n line 28 (see instruction	ns if Schedule C	C, line 12, wa	as complet	ed)	30	-8073003	<u> </u>
	31		otal tax (Schedule J							31	0	
Ø	32		ayments: a 2004 overpaym		32a							
ent			005 estimated tax pa		32b							
Σ			ess 2005 refund applied		32c) d Bal ▶	32d					
l Pa			ax deposited with Fo	1		1	32e			20		
anc			redits: (1) Form 2439		(2) Form 4136		32f		_	32g 33		
Tax and Payments	33		. ,	,	. Check if Form 2220 is			. •	Ш	34	0	\vdash
_	34				total of lines 31 and 33 the total of lines 31 ar			 id	•	35		
	36				lited to 2006 estimate		Jane Overpa	Refunded	. ▶	36		
_	<u> </u>	Unde	er penalties of perjury, I de	clare that I have exami	ned this return, including acc	companying schedule					wledge and belief, it	t is true,
Si	gn				than taxpayer) is based on a	ii information of which	cn preparer nas	any knowled		May the	IRS discuss this	return
He	ere	_	ONALD WILLI	AIVIOUN	9/14/06	TREASI	URER				preparer shown uctions)? Yes [
		S	ignature of officer		Date	Title	1		(,	
Pa	id		Preparer's TH	OMAS SN	ЛITH	Date O/1		Check if	. —	Prepa	rer's SSN or PTIN	
Pre	pare	er's	signature Firm's name (or			9/1	4/06	self-employe		OFFOF	P00226626	
Us	e On	ly	yours if self-employe	$\frac{\text{CPA FIR}}{137 \text{ WES}}$	<u>M</u> ST MAIN STREET, A	NYTOWN NO	28044	EIN Phone		95565) 6805500	
_			address, and ZIP co	ue y 137 VVES	, mant others, A	TIALLOWNIN, INC	J 2004 I	FIIOHE	no.	יטטו	, 0000000	

Page 2 Form 1120 (2005) Cost of Goods Sold (see instructions) Schedule A 1 1 57386029 2 2 Purchases. . . . 322612092 3 3 Cost of labor 4 Additional section 263A costs (attach schedule) . . . 4 41491378 5 Other costs (attach schedule) 5 6 432489499 7 7 Inventory at end of year . . . 8 8 Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2. 9a Check all methods used for valuing closing inventory: (ii) Lower of cost or market (iii) ☐ Other (Specify method used and attach explanation.) ▶ c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970) d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing e If property is produced or acquired for resale, do the rules of section 263A apply to the corporation? ✓ No Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," **√** No Schedule C **Dividends and Special Deductions** (see instructions) (a) Dividends (c) Special deductions (b) % received (a) \times (b) Dividends from less-than-20%-owned domestic corporations (other than 70 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed 80 Dividends on debt-financed stock of domestic and foreign corporations . . . instructions 42 4 Dividends on certain preferred stock of less-than-20%-owned public utilities 48 Dividends on certain preferred stock of 20%-or-more-owned public utilities . . . 70 Dividends from less-than-20%-owned foreign corporations and certain FSCs 6 80 Dividends from 20%-or-more-owned foreign corporations and certain FSCs . . . 7 100 Dividends from wholly owned foreign subsidiaries 8 Total. Add lines 1 through 8. See instructions for limitation 9 10 Dividends from domestic corporations received by a small business investment 100 company operating under the Small Business Investment Act of 1958 100 11 85 15396347 15396347 Dividends from controlled foreign corporations (attach Form 8895) . 12 13 Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12 . Income from controlled foreign corporations under subpart F (attach Form(s) 5471) 14 IC-DISC and former DISC dividends not included on lines 1, 2, or 3 . . . 16

Schedule E Compensation of Officers (see instructions for page 1, line 12)

Deduction for dividends paid on certain preferred stock of public utilities

Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4 . . . ▶

17

18

19

Note: Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1) are \$500,000 or more.

Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 29b ▶

15396347

	(a) Name of officer	(b) Social security number	(c) Percent of time devoted to		corporation owned	(f) Amount of compensation
	(a) Hame of emes.	(a) coolar coolary riamson	business	(d) Common	(e) Preferred	(i) / illiount or componeution
1			%	%	%	
			%	%	%	
			%	%	%	
			%	%	%	
			%	%	%	
2	Total compensation of officers					
3	Compensation of officers claimed on So					
4	Subtract line 3 from line 2. Enter the res					

15396347

Page 3 Form 1120 (2005) Schedule J **Tax Computation** (see instructions) Check if the corporation is a member of a controlled group Important: Members of a controlled group, see instructions. 2a If the box on line 1 is checked, enter the corporation's share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (2) \$ \$ Enter the corporation's share of: (1) Additional 5% tax (not more than \$11,750) (2) Additional 3% tax (not more than \$100,000) Income tax. Check if a qualified personal service corporation (see instructions) . . . Alternative minimum tax (attach Form 4626) 6a Possessions tax credit (attach Form 5735) 6b b Credits from: Form 8834 ☐ Form 8907, line 23 General business credit. Check box(es) and indicate which forms are attached: ☐ Form 3800 ☐ Form(s) (specify) ► Credit for prior year minimum tax (attach Form 8827) Total credits. Add lines 6a through 6f 8 Personal holding company tax (attach Schedule PH (Form 1120)) . . 9 Other taxes. Check if from: Form 4255 ☐ Form 8611 ☐ Form 8697 Form 8866 Form 8902 Other (attach schedule) . . . Total tax. Add lines 8 through 10. Enter here and on page 1, line 31 11 Schedule K Other Information (see instructions) Yes No Yes No Check accounting method: 7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total **b** ✓ Accrual **c** Other (specify) ► voting power of all classes of stock of the corporation See the instructions and enter the: entitled to vote or (b) the total value of all classes of stock Business activity code no. ► 541511 of the corporation? Business activity
COMPUTER SOFTWARE If "Yes," enter: (a) Percentage owned ▶ 100 and (b) Owner's country ► FRANCE Product or service ► COMPUTER SOFTWARE At the end of the tax year, did the corporation own, The corporation may have to file Form 5472, Information directly or indirectly, 50% or more of the voting stock of Return of a 25% Foreign-Owned U.S. Corporation or a a domestic corporation? (For rules of attribution, see Foreign Corporation Engaged in a U.S. Trade or Business. Enter number of Forms 5472 attached ▶14...... If "Yes," attach a schedule showing: (a) name and Check this box if the corporation issued publicly offered employer identification number (EIN), (b) percentage debt instruments with original issue discount, . ▶ □ owned, and (c) taxable income or (loss) before NOL and If checked, the corporation may have to file Form 8281, special deductions of such corporation for the tax year Information Return for Publicly Offered Original Issue ending with or within your tax year. Discount Instruments. Is the corporation a subsidiary in an affiliated group or a Enter the amount of tax-exempt interest received or **√** parent-subsidiary controlled group? accrued during the tax year ▶ \$0. If "Yes," enter name and EIN of the parent Enter the number of shareholders at the end of the tax corporation > year (if 100 or fewer) ▶1...... If the corporation has an NOL for the tax year and is At the end of the tax year, did any individual, partnership, electing to forego the carryback period, check here 🕨 🗸 corporation, estate, or trust own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules If the corporation is filing a consolidated return, the statement of attribution, see section 267(c).) . . . required by Temporary Regulations section 1.1502-21T(b)(3) If "Yes," attach a schedule showing name and identifying must be attached or the election will not be valid. number. (Do not include any information already entered

in 4 above.) Enter percentage owned ▶100 12 Enter the available NOL carryover from prior tax years During this tax year, did the corporation pay dividends (other (Do not reduce it by any deduction on line than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated Are the corporation's total receipts (line 1a plus lines 4 13 ✓ earnings and profits? (See sections 301 and 316.) through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000? . . . If "Yes," file Form 5452, Corporate Report of Nondividend Distributions. If "Yes," the corporation is not required to complete If this is a consolidated return, answer here for the parent Schedules L, M-1, and M-2 on page 4. Instead, enter the total amount of cash distributions and the book value of corporation and on Form 851, Affiliations Schedule, for property distributions (other than cash) made during the each subsidiary. tax year. ▶ \$ Note: If the corporation, at any time during the tax year, had assets or operated a business in a foreign country or U.S. possession, it may be

required to attach Schedule N (Form 1120), Foreign Operations of U.S. Corporations, to this return. See Schedule N for details.

Page 4 Form 1120 (2005)

	e: The corporation is not required to complete to be seen to be se		1, and M-2 if Question of tax year	n 13 on Schedule K is End of ta	
SCI			-		
	Assets	(a)	(b)	(c)	(d)
1	Cash	0.47055	31620	0070200	95868
2 a	Trade notes and accounts receivable	947655	0.47055	9879329	070200
b	Less allowance for bad debts	(947655	(879329
3	Inventories		1599455		1627193
4	U.S. government obligations		004		
5	Tax-exempt securities (see instructions) .		331		4500
6	Other current assets (attach schedule)		13794		1500
7	Loans to shareholders				12345
8	Mortgage and real estate loans				
9	Other investments (attach schedule)	200075		005407	
10a	Buildings and other depreciable assets	828075		835467	0.4=00.4
b	Less accumulated depreciation	(590772)	237303	(617806)	217661
11a	Depletable assets	,		,	
b	Less accumulated depletion	()		(
12	Land (net of any amortization)				
13a	Intangible assets (amortizable only)	25000		25000	
b	Less accumulated amortization	(1667)		(3334)	21666
14	Other assets (attach schedule)		9460		7259
15	Total assets		2862951		2862791
	Liabilities and Shareholders' Equity				
16	Accounts payable		788111		802904
17	Mortgages, notes, bonds payable in less than 1 year		155000		75220
18	Other current liabilities (attach schedule) .		245672		195854
19	Loans from shareholders		286071		243197
20	Mortgages, notes, bonds payable in 1 year or more		123591		124986
21	Other liabilities (attach schedule)				
22	Capital stock: a Preferred stock				
	b Common stock	1000	1000	1000	1000
23	Additional paid-in capital				
24	Retained earnings—Appropriated (attach schedule)				
25	Retained earnings—Unappropriated		1263506		149630
26	Adjustments to shareholders' equity (attach schedule)				
27	Less cost of treasury stock		()		()
28	Total liabilities and shareholders' equity	/i	2862951		2862791
Sch	nedule M-1 Reconciliation of Incom		s With Income per	Return (see instructi	ons)
1	Net income (loss) per books	156124		on books this year not	
2	Federal income tax per books	91343	included on this re	, ,	
3	Excess of capital losses over capital gains .		Tax-exempt intere	st \$	
4	Income subject to tax not recorded on books				
	this year (itemize):				
				s return not charged	
5	Expenses recorded on books this year not		_	me this year (itemize):	
	deducted on this return (itemize):		· ·	\$	
а	Depreciation \$		b Charitable contrib	utions \$	
b	Charitable contributions \$				
С	Travel and entertainment \$ 24830	00005			•
•	4865	29695	1		0
6 C ol	Add lines 1 through 5	277162	(0 /	e 28)—line 6 less line 9	277162
	nedule M-2 Analysis of Unappropr			-	e L)
1	Balance at beginning of year	1263506		Cash	
2	Net income (loss) per books	156124		Stock	
3	Other increases (itemize):			Property	
			· `	itemize):	
4	Add lines 1.2 and 3	1419630	7 Add lines 5 and 6		1/19630

Internal Revenue Service

(Rev. December 2005) Department of the Treasury

Name

Application for Automatic 6-Month Extension of Time To File Certain Business Income Tax, Information, and Other Returns

► File a separate application for each return.

OMB No. 1545-0233

Type or **Print**

WORKING HARD INC INCORPORATED

Taxpayer identification number

File by the due date for the return for which an extension is requested. See

instructions.

110000007

37 ANY STREET

Number, street, and room or suite no. If P.O. box, see instructions.

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code)).

ANYTOWN, NC 28041-0280

•	~							
Caution:	Carefully	complete all	ıtems.	Incorrect	information	may cause	e delav or re	election.

1	Enter only one code for type of return that the	his automatic (6-month extension is for (see below)	1 2
2	If the foreign corporation does not have an o	office or place	of business in the United States, check here	▶□
3	If the organization qualifies under Regulation	ns section 1.60	81-5 (see instructions), check here	▶ □
4a	For calendar year 20.05, or other tax year b	beginning	, 20, and ending	, 20
b	Short tax year. If this tax year is less than 1 ☐ Initial return ☐ Final return ☐		eck the reason: ccounting period	to be filed
5	•	•	of a group that intends to file consolidated, che is, and EIN for each member covered by this	
6	Tentative total tax (see instructions)		6	-8073003
7	Total payments and credits (see instructions	s)		0
8	Balance due. Subtract line 7 from line 6. Ge Electronic Federal Tax Payment System (I Electronic Funds Withdrawal (EFW) (see in	EFTPS), a Fed	eral Tax Deposit (FTD) Coupon, or	0
		EFTPS), a Fed	eral Tax Deposit (FTD) Coupon, or	0 Form
	Electronic Federal Tax Payment System (I Electronic Funds Withdrawal (EFW) (see in Insion	EFTPS), a Fed	eral Tax Deposit (FTD) Coupon, or exceptions)	
Exte s Forn	Electronic Federal Tax Payment System (I Electronic Funds Withdrawal (EFW) (see in Insign pr: 10 706-GS(D)	EFTPS), a Fed astructions for Form	eral Tax Deposit (FTD) Coupon, or exceptions)	Form
Exte s Forn	Electronic Federal Tax Payment System (Belectronic Funds Withdrawal (EFW) (see in Insion or: n 706-GS(D) n 706-GS(T)	EFTPS), a Fed nstructions for Form Code	eral Tax Deposit (FTD) Coupon, or exceptions)	Form Code
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Cat. No. 13804A